

MULTIPLE DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-876)							SERIAL NO.	FILING DATE
APPLICANT(S)							09/16/41-808	
CLAIMS							09/16/41	
NO.	IND.	DEP.	IND.	DEP.	IND.	DEP.	IND.	DEP.
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PTO-1380 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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